Full Name of Party Filing Document	
Mailing Address (Street or Post Office Box)	
City, State and Zip Code	
Telephone	
IN THE DISTRICT COURT FOR	THE JUDICIAL DISTRICT
FOR THE STATE OF IDAHO, IN AND FO	OR THE COUNTY OF
	Case No
	MEMORANDUM OF COSTS
, Plaintiff(s),	
vs.	
_	
, Defendant(s).	
Derendanii(s).	
I swear under oath:	
That I am the above named Plaintiff and t	the prevailing party in this action. I am requesting
an award of the following costs I have incurre	ed in this case, as a matter of right under Rule
54(d)(1) of the Idaho Rules of Civil Procedure	e:
FILING FEE	\$
SERVICE OF PRO	OCESS \$
OTHER	\$ TOTAL \$
	OTAL \$
Date:	

Typed/printed name	Signature
STATE OF IDAHO)	
County of) ss.	
SUBSCRIBED AND SWORN before me on this _	day of
	Notary Public for Idaho
	Residing at Commission expires